



Request to tour a
Little Rock Wastewater
Treatment Facility

Name _____

Organization Represented _____

Address _____

Telephone _____ Telephone _____ FAX _____

Dates and times preferred for tour in order of preference

1st choice _____ 2nd choice _____ 3rd choice _____

How many tourists are expected? _____

Which of the treatment plants are you interested in touring?

Fourche Creek Wastewater Treatment Plant
9500 Birdwood Avenue

*Adams Field Wastewater Treatment Plant
1001 Temple Drive
*(Tours are presently unavailable due to construction.)

Do not sign below this line. For Utility purposes only.

Approved

Not approved

Signature _____

Designated Utility Guide _____